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Bib Data Sheet

CONFIRMATION NO. 7458

|   |   |                                |  |                                      |
|---|---|--------------------------------|--|--------------------------------------|
| SERIAL NUMBER<br>10/717,395   | FILING DATE<br>11/19/2003<br><br>RULE   | CLASS<br>607                   | GROUP ART UNIT<br>3766   | ATTORNEY<br>DOCKET NO.<br>P-11110.00 |
| APPLICANTS<br><br>Walter H. Olson, North Oaks, MN;  |   |                                |  |                                      |
| ** CONTINUING DATA ***** <i>tkel</i><br>This appln claims benefit of 60/428,400 11/22/2002  |   |                                |  |                                      |
| ** FOREIGN APPLICATIONS ***** <i>tkel</i>   |   |                                |  |                                      |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED<br>** 02/18/2004  |   |                                |  |                                      |
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance<br>Verified and<br>Acknowledged |   | STATE OR<br><br>COUNTRY<br>MN  | SHEETS<br><br>DRAWING<br>6   | TOTAL<br><br>CLAIMS<br>27            |
| ADDRESS<br>27581<br>MEDTRONIC, INC.<br>710 MEDTRONIC PARKWAY NE<br>MS-LC340<br>MINNEAPOLIS , MN<br>55432-5604   |   | INDEPENDENT<br><br>CLAIMS<br>4 |  |                                      |
| TITLE<br>Subcutaneous implantable cardioverter/defibrillator  |   |                                |  |                                      |
| FILING FEE<br><br>RECEIVED<br>1112  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                      |